

210 N 1950 W
Salt Lake City, UT 84134
Telephone: (801) 297-2600

ORIGINAL COMPLAINT REPORT

MOTOR VEHICLE ENFORCEMENT DIVISION

TC-451
Rev. 11/00

NATURE OF COMPLAINT _____

OFFICIAL USE ONLY

Case Number _____
Assign To _____
Date of Report _____

COMPLAINANT

Name		Home Telephone		Business Telephone
Address	City	State	Zip	Dealer #

SUSPECT

Name		Home Telephone		Business Telephone
Address	City	State	Zip	Dealer #

VEHICLE PURCHASED

Year	Make	Model	Color
V.I.N.			Purchase Price
Financed Through			Date of Purchase

TRADE-IN VEHICLE

Year	Make	Model	Color
V.I.N.			Was Title Delivered? <input type="checkbox"/> Yes <input type="checkbox"/> No
Amount of Payoff		Bank or Finance Company	

The following is a brief statement of facts concerning this case. This information is true and correct to the best of my knowledge. I hereby request the Motor Vehicle Enforcement Division to investigate this complaint.

Attach Additional Sheet(s) if Additional Space is Needed

I understand that this complaint represents a claim filed with the Motor Vehicle Enforcement Division in accordance with Chapter 3, Title 41, Utah Code Annotated (1953, as amended). I understand that if this claim is filed within one year after the cause of this action arose, I have two years from the date on this claim to file an action against the Dealer Bond. I also declare, under penalty of perjury, that, to the best of my knowledge, all statements made are true, correct and complete.

Signature of Complainant _____ Date _____

Subscribed and sworn to before me this date _____ Signed _____

Notary Public or E.O. Number _____

ORIGINAL - File Copy **YELLOW** - Investigator Copy **PINK** - Division Copy

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